

BEFORE THE ARIZONA MEDICAL BOARD

In the Matter of

**GABRIELLE GOODRICK, M.D.**

Holder of License No. 22811  
For the Practice of Allopathic Medicine  
In the State of Arizona.

Case No. MD-10-1229A

**ORDER FOR PROBATION WITH  
PRACTICE RESTRICTION**

The Arizona Medical Board ("Board") considered this matter at its public meeting on February 9, 2011. Gabrielle Goodrick, M.D., ("Respondent") appeared with legal counsel, Calvin Raup, before the Board for a formal interview pursuant to the authority vested in the Board by A.R.S. § 32-1451(H). The Board voted to issue Findings of Fact, Conclusions of Law and Order after due consideration of the facts and law applicable to this matter.

**FINDINGS OF FACT**

1. The Board is the duly constituted authority for the regulation and control of the practice of allopathic medicine in the State of Arizona.

2. Respondent is the holder of license number 22811 for the practice of allopathic medicine in the State of Arizona.

3. The Board initiated case number MD-10-1229A after Respondent reported to Board Staff that she had taken Fentanyl from her office for her personal use and that she may have a substance abuse problem. Additionally, Respondent reported that she was currently hospitalized for a health-related issue. Respondent met with the Board's Physician Health Program Contractor (Contractor) who determined that Respondent was not safe to practice due to her health issues and recommended that she attend a chemical dependency evaluation. Respondent signed an Interim Consent Agreement for Practice Limitation on October 1, 2010.

4. Respondent underwent the evaluation and completed residential treatment for substance abuse on December 9, 2010 at a Board approved facility. The evaluators recommended that Respondent may return to work with continued sobriety and approval of the Physician Health Program. The evaluators also recommended that Respondent not have intravenous drugs available in her office and stated that after a time frame of at least 30 days from her return to practice, that she may request to be allowed to use Versed in her practice. The Contractor recommended that Respondent participate in the Physician's Health Program for a period of five years to include treatment by a psychiatrist. The Contractor also recommended that Respondent not be allowed to use any intravenous drugs in her practice and that the restriction could be reviewed in two months to allow the use of Versed only for conscious sedation patients. On December 21, 2010, Respondent entered into an Interim Agreement for PHP Participation.

## CONCLUSIONS OF LAW

1. The Board possesses jurisdiction over the subject matter hereof and over Respondent.

2. The conduct and circumstances described above constitute unprofessional conduct pursuant to A.R.S. § 32-1401(27)(f) (“[h]abitual intemperance in the use of alcohol or habitual substance abuse.”) and A.R.S. § 32-1401 (27)(g) (“[u]sing controlled substances except if prescribed by another physician for use during prescribed course of treatment[.]”).

## ORDER

IT IS HEREBY ORDERED THAT:

I. This Order supersedes the December 21, 2010, Interim Agreement for PHP Participation between the Executive Director and Respondent.

1 II. Respondent's Interim Practice Limitation dated October 1, 2010, is  
2 terminated as of the effective date of this Order.

3 III. The Board retains jurisdiction and may initiate new action based upon any  
4 violation of this Order.

5 IV. Respondent is placed on Probation for **five years** with the following terms  
6 and conditions:

7 1. **Participation**<sup>1</sup>. Respondent shall promptly enroll in and participate in the  
8 Board's Physician Health Program (PHP) monitoring service which is administered by a  
9 private contractor. ("Monitor").

10 2. **Relapse Prevention Group**. Respondent shall attend the Monitor's relapse  
11 prevention group therapy sessions one time per week for the duration of this Order, unless  
12 excused by the relapse prevention group facilitator for good cause. Individual relapse  
13 therapy may be substituted for one or more of the group therapy sessions, if Monitor pre-  
14 approves substitution. The relapse prevention group facilitators or individual relapse  
15 prevention therapist shall submit monthly reports to the Monitor regarding attendance and  
16 progress.

17 3. **12 Step or Self-Help Group Meetings**. If applicable, Respondent shall  
18 attend ninety 12-step meetings or other self-help group meetings appropriate for  
19 substance abuse and approved by the Monitor, for a period of ninety days. Upon  
20 completion of the ninety meetings in ninety days, Respondent shall participate in a 12-step  
21 recovery program or other self-help program appropriate for substance abuse as  
22 recommended by the Monitor. Respondent shall attend a minimum of three 12-step or  
23 other self-help program meetings per week.. Two meetings per month must be Caduceus  
24

25  

---

<sup>1</sup> Respondent's PHP participation is retroactive to December 21, 2010.

1 meetings. Respondent must maintain a log of all self-help meetings.

2 4. **Approved Primary Care Physician.** Respondent shall promptly obtain a  
3 primary care physician and shall submit the name of the physician to the Monitor in writing  
4 for approval. The approved primary care physician ("PCP") shall be in charge of providing  
5 and coordinating Respondent's medical care and treatment. Except in an *Emergency*,  
6 Respondent shall obtain medical care and treatment only from the PCP and from health  
7 care providers to whom the PCP refers Respondent. Respondent shall promptly provide  
8 a copy of this Order to the PCP. Respondent shall also inform all other health care  
9 providers who provide medical care or treatment that Respondent is participating in PHP.  
10 "*Emergency*" means a serious accident or sudden illness that, if not treated immediately,  
11 may result in a long-term medical problem or loss of life.

12 5. **Medication.** Except in an *Emergency*, Respondent shall take no *Medication*  
13 unless the PCP or other health care provider to whom the PCP refers Respondent  
14 prescribes the *Medication*. Respondent shall not self-prescribe any *Medication*.  
15 "*Medication*" means a prescription-only drug, controlled substance, and over-the counter  
16 preparation, other than plain aspirin, plain ibuprofen, and plain acetaminophen. If a  
17 controlled substance is prescribed, dispensed, or administered to Respondent by any  
18 person other than PCP, Respondent shall notify the PCP in writing within 48 hours and  
19 notify the Monitor immediately.

20 6. **No Alcohol or Poppy Seeds.** Respondent shall not consume alcohol, any  
21 food, or other substance containing poppy seeds or alcohol.

22 7. **Biological Fluid Collection.** Respondent shall provide the Monitor in  
23 writing with one telephone number that shall be used to contact Respondent on a 24 hour  
24 per day/seven day per week basis to submit to biological fluid collection. For the purposes  
25 of this section, telephonic notice shall be deemed given at the time a message to appear is

1 left at the contact telephone number provided by Respondent. Respondent authorizes any  
2 person or organization conducting tests on the collected samples to provide testing results  
3 to the Monitor. Respondent shall comply with all requirements for biological fluid  
4 collection.

5 8. **Out of State Travel and/or Unavailability at Home/Office Telephone**  
6 **Number.** Respondent shall provide the Monitor with written notice of any plans to travel  
7 out of state.

8 9. **Payment for Services.** Respondent shall pay for all costs, including Monitor  
9 costs, associated with participating in PHP at time service is rendered, or within 30 days of  
10 each invoice sent to Respondent.

11 10. **Interviews.** Respondent shall appear in person before the Monitor for  
12 interviews upon request, upon reasonable notice.

13 11. **Address and Phone Changes, Notice.** Respondent shall immediately notify  
14 the Monitor in writing of any change in office or home addresses and telephone numbers.

15 12. **Relapse, Violation.** In the event of chemical dependency relapse by  
16 Respondent or Respondent's use of drugs or alcohol in violation of the Order, Respondent  
17 shall promptly enter into an Interim Order for Practice Restriction and Consent to the  
18 Same that requires, among other things, that Respondent not practice medicine until such  
19 time as Respondent successfully completes long-term inpatient treatment for chemical  
20 dependency designated by the Monitor and obtains affirmative approval from the Board or  
21 the Executive Director to return to the practice of medicine. Prior to approving  
22 Respondent's request to return to the practice of medicine, Respondent may be required  
23 to submit to witnessed biological fluid collection or undergo any combination of physical  
24 examination, psychiatric or psychological evaluation. **In no respect shall the terms of**  
25 **this paragraph restrict the Board's authority to initiate and take disciplinary action**

1 for violation of this Order.

2 13. **Notice Requirements.** Respondent shall immediately provide a copy of this  
3 Order to all current and future employers and all hospitals and free standing surgery  
4 centers where Respondent has privileges. Within 30 days of the date of this Order,  
5 Respondent shall provide the Monitor with a signed statement of compliance with this  
6 notification requirement. Respondent is further required to notify, in writing, all employers,  
7 hospitals and free standing surgery centers where Respondent currently has or in the  
8 future gains employment or privileges, of a chemical dependency relapse.,

9 14. **Out-of-State.** In the event Respondent resides or practices as a physician  
10 in a state other than Arizona, Respondent shall participate in the rehabilitation program  
11 sponsored by that state's medical licensing authority or medical society. Respondent shall  
12 cause the monitoring state's program to provide written quarterly reports to the Monitor  
13 regarding Respondent's attendance, participation, and monitoring. The monitoring state's  
14 program and Respondent shall immediately notify the Monitor if Respondent: a) is non-  
15 compliant with any aspect of the monitoring requirements; b) relapses; c) tests positive for  
16 controlled substances; d) has low specific gravity urine drug test(s), missed and/or late  
17 urine drug tests, or otherwise rejected urine drug tests; and e) is required to undergo any  
18 additional treatment.

19 15. Respondent shall immediately obtain a treating psychiatrist approved by the  
20 Monitor and shall remain in treatment with the psychiatrist until further order. Respondent  
21 shall instruct the psychiatrist to release to the Monitor, upon request, all records relating to  
22 Respondent's treatment, and to submit quarterly written reports to the Monitor regarding  
23 diagnosis, prognosis, medications, and recommendations for continuing care and  
24 treatment of Respondent. Respondent shall provide the psychiatrist with a copy of this  
25 order. Respondent shall pay the expenses of all the psychiatric care and for the

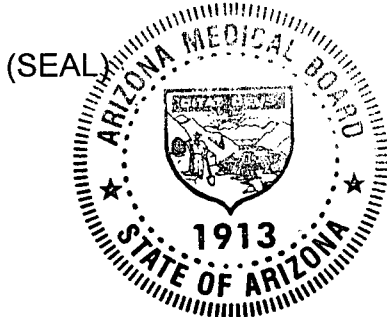
1 preparation of the quarterly reports. After **twelve months**, Respondent may submit a  
2 written request to the Monitor requesting termination of the requirement that Respondent  
3 remain in treatment with a psychiatrist. The decision to terminate will be based, in part,  
4 upon the treating psychiatrist's recommendation for continued care and treatment.

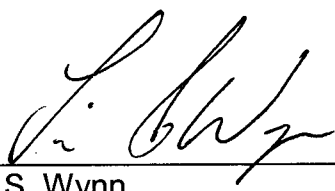
5 **16. Practice Restriction.** Respondent is prohibited from maintaining, administering  
6 or otherwise using intravenous drugs in her office practice. Two months after the effective  
7 date of this Order, Respondent may petition the Physician Health Program monitor and  
8 request that the practice restriction be modified to allow the use of Versed in her office  
9 practice. She may not request termination of the entire practice restriction, however, until  
10 she has completed at least three years of participation in the Physician Health Program.

11 V. The Board has determined that rehearing or review of this Order is contrary to  
12 the public interest and therefore issues this ruling as a final decision without opportunity for  
13 rehearing or review. This Order is a final decision for purposes of judicial review

14  
15 DATED AND EFFECTIVE this 9<sup>th</sup> day of FEBRUARY, 2011.  
16  
17  
18

19 ARIZONA MEDICAL BOARD




21  
22 By   
23 Lisa S. Wynn  
24 Executive Director

25 EXECUTED COPY of the foregoing mailed  
this 10<sup>th</sup> day of February, 2011 to:

1 Calvin Raup  
2 Raup & Hergenroether PLLC  
3 One Renaissance Square  
4 Two N. Central Avenue, Suite 1100  
5 Phoenix AZ 85004-0001  
6 ATTORNEY FOR RESPONDENT

7 ORIGINAL of the foregoing filed  
8 this 22<sup>nd</sup> day of February 2011 with:

9 Arizona Medical Board  
10 9545 E. Doubletree Ranch Road  
11 Scottsdale, AZ 85258

12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
  
Arizona Medical Board Staff